

PUBLIC VOUCHER FOR PURCHASES AND

SERVICES OTHER THAN PERSONAL

Bu. Vou. No. 138

U. S. Cost Reimbursable

(Department, bureau, or establishment)

Voucher prepared at

(Give place and date)

THE UNITED STATES, Dr.,

Payee's Account No. 629

To

(Payee)

PAID BY

No. and Date of Order	Date of Delivery or Service	ARTICLES OR SERVICES (Enter description, item number of contract or Federal supply schedule, and other information deemed necessary) Discount Terms	QUANTITY	UNIT PRICE		AMOUNT	
				Cost	Per	Dollars	Cts.
		Fixed Fee				2,287.	00
Use continuation sheet(s) if necessary							
Shipped from to Weight Government B/L No.						Total	2,287.00

PAYMENT:

Complete ☐  
Partial ☐  
Final ☐

I certify that the above bill is correct and just and that payment has not been received.

(Sign original only)

25X1A

25X1A

Date

Pe

Title

Amount verified; correct for

(Signature or initials)

2,287.00

Contract No. A101

Date

Req. No.

Date

Invoice Rec'd.

Pursuant to authority vested in me, I certify that this account is correct and proper for payment.

Approved for \$ 2,287.00

†

Officer)

25X1A

By

SIGN  
ORIGINAL  
ONLY

Title Authorized Certifying Officer

Title Contracting Officer

Date

THE REVERSE OF THIS FORM MUST BE EXECUTED WHEN PURCHASES ARE MADE OR SERVICES SECURED WITHOUT WRITTEN AGREEMENT IN ANY FORM

ACCOUNTING CLASSIFICATION (Appropriation Symbol must be shown; other classification optional)

APPROVED:

25X1A

Approving Officer

Paid by { Check No. dated 19 for \$ on Treasurer of the United States in favor of payee named above.  
Cash, \$ on 19 Payee (Sign original only)

\* When a voucher is signed or receipted in the name of a company or corporation, the name of the person writing the company or corporate name, as well as the capacity in which he signs, must appear. For example: "John Doe Company, per John Smith, Secretary", or "Treasurer", as the case may be.  
† If the ability to certify and authority to approve are combined in one person, one signature only is necessary; otherwise the approving officer will sign on the line below Approved for \$ and

Per

Title

U. S. Cost Reimbursable

Sheet No. 1 of Bureau Voucher No. 138

Approved For Release 2000/04/11 : CIA-RDP64-00360R000400070019-1

~~THE RAMO WOULDRIE COR. JRATION~~

LOS ANGELES 45, CALIFORNIA

STATINTL

INTEROFFICE CORRESPONDENCE

TO:

[REDACTED]

CC: Accounting ✓  
File

DATE: November 25, 1955

SUBJECT MJO 5041

FROM:

STATINTL

[REDACTED]

It is estimated at as of October 31, 1955,  
Project 5041 was about 7% complete.

STATINTL

[REDACTED]

SAPC 3118/A  
COPY 1 OF 3THE RAMO-WOOLDRIDGE CORPORATION  
8820 Bellanca Avenue  
Los Angeles 45, CaliforniaSUBJECT APPROVAL OF FIXED FEE - Contract A-101, System 1-1

## ATTENTION:

IN ACCORDANCE WITH Clause 4 (c) of the Contract, The Contractor presents herewith his claim for fixed fee due under the subject contract for the period 1/16/55 through 10/31/55 in the amount of \$2,287.00

TOTAL AUTHORIZED FEE PER CONTRACT \$36,300.00

ELAPSED TIME METHOD	OF COMPLETION METHOD	ON EXPENDITURES
Elapsed Time - Mo. <u>9½</u>	Project Engineer % of Completion <u>7%</u>	Amount of Contract Excluding Fee \$ <u>470,000.00</u>
Amt. due each Mo. \$ <u>2,688.88</u>	Total Fee Earned <u>2,541.00</u>	Total Expended To Date <u>177,189.76</u>
Total due to date \$ <u>25,544.36</u>	Less 10% H.B. <u>254.00</u>	Percent of Completion Based on Expenditures <u>37.7%</u>
Fee claimed to date <u>- 0 -</u>	Less payments <u>- 0 -</u>	Percent of Completion Claim based on Expenditures
Less 10% H.B. <u>- 0 -</u>	Percent of Completion Claim <u>2,287.00</u>	Less 10% H.B. \$ <u>          </u>
Less payments <u>- 0 -</u>		
Elapsed Time Claim <u>25,544.36</u>		

Project Engineer Signature

STATINTL

Amount of fee claimed by Contractor for period

1/16/55 through 10/31/55 \$2,287.00

I certify that the fixed fee claimed is correct and just, and that it is proportionate to the progress made on the contract.

STATINTL

Director Administration and Finance

STATINTL